PART B - FEE(S) TRANSMITTAL

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| SEP 0 4 | ربر 2009 | | or <u>Fax</u> | Alexandria, Virg (571)-273-2885 | inia 22313-1450 | , |
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| 09/00/2000 INTEGUL 00000570 4000570 | | | | (Depositor's name) | | |
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| 01 FC:1501 | | | | <u></u> | | (Date) |
| APPLICATION NO. | APPLICATION NO. FILING DATE | | FIRST NAMED INVE | | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/603,706 06/25/2003 Timothy J. Moulsley B 034358USA 338' TITLE OF INVENTION: RADIO COMMUNICATION SYSTEM | | | | | | 3387 |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE | DUE PREV. PAID ISSU | JE FEE TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 09/04/2009 |
| EXAMINER ART UNIT | | ART UNIT | CLASS-SUBCLAS | s | | |
| NGUYEN, TU X | | 2618 | 455-522000 | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | |
| KONINKLIJKE PHILIPS ELECTRONICS N.V. EINDHOVEN, THE NETHERLANDS | | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government | | | | | | |
| 4a. The following fee(s) are: Silssue Fee Publication Fee (No sillowing Advance Order - # of | mitted) | D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 141270 (enclose an extra copy of this form). | | | | |
| 5. Change in Entity Status a. Applicant claims Si | MALL ENTITY status. | See 37 CFR 1.27. | | | ALL ENTITY status. See 37 C | |
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| Typed or printed name K | | | | No. <u>43600</u> | | |
| This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313- | 1430. | | | | the public which is to file (an minutes to complete, includi comments on the amount of til Trademark Office, U.S. Dep S. SEND TO: Commissioner | |